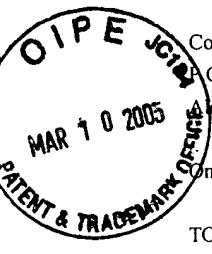


I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

*JPW*  
**PATENT**  
Attorney Docket No.: 018865-004410US  
Client Reference No.: 17732-14000.003



Commissioner for Patents

P.O. Box 1450  
Alexandria, VA 22313-1450

On March 7, 2005

TOWNSEND and TOWNSEND and CREW LLP

By:

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Honorio T. Granada  
Rajeev Joshi

Application No.: 10/660,866

Filed: September 11, 2003

For: FLIP CHIP SUBSTRATE DESIGN

Examiner: Douglas W. Owens

Art Unit: 2811

**INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references [excluding cited U.S. Patents, U.S. Patent Application publications, and appropriate IFW-stored, pending U.S. Patent Applications and portions thereof, per 1287 OG 163] are enclosed.

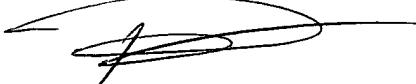
It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

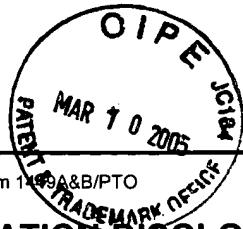
Respectfully submitted,



Patrick R. Jewik  
Reg. No. 40,456

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, California 94111-3834  
Tel: 415-576-0200  
Fax: 415-576-0300  
PRJ:prj

60437335 v1



Substitute for form 1409A&B/PTO  
**INFORMATION DISCLOSURE  
 STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

<b>Complete if Known</b>	
Application Number	10/660,866
Filing Date	September 11, 2003
First Named Inventor	Granada, Honorio T.
Art Unit	2811
Examiner Name	Douglas W. Owens
Attorney Docket Number	018865-004410US

**U.S. PATENT DOCUMENTS+**

Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
AA	US-6,836,023		12-28-2004	Joshi	
AB	US-6,806,580		10-19-2004	Joshi	
AC	US-6,798,044		09-28-2004	Joshi	
AD	US-6,753,605		06-22-2004	Joshi	
AE	US-6,740,541		05-25-2004	Joshi	
AF	US-6,731,003		05-04-2004	Joshi	
AG	US-6,720,642		04-13-2004	Joshi	
AH	US-6,696,321		02-22-2004	Joshi	
AI	US-6,683,375		01-27-2004	Joshi	
AJ	US-				
AK	US-				
AL	US-				
AM	US-				
AN	US-				
AO	US-				
AP	US-				
AQ	US-				
AR	US-				
AS	US-				
AT	US-				

**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)			
AU							<input type="checkbox"/>
AV							<input type="checkbox"/>
AW							<input type="checkbox"/>
AX	WO	00/08684			02-17-2000	Joshi	<input type="checkbox"/>
AY							<input type="checkbox"/>
AZ							<input type="checkbox"/>
BA							<input type="checkbox"/>
BB							<input type="checkbox"/>

Examiner Signature	Date Considered
--------------------	-----------------

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.